PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I

Application or Docket Number

09779076

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS			.28		1		Γ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEAE	BLE CLAIMS	28 minus 20=		· &		Ţ	X\$ 9=	72	OR	X\$18=		
IND	EPENDENT CLA	AIMS	√ minus 3 =		- 1			X40=	40	OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		ÖR	+270=		
* If	the difference i	in column 1 is	less than zer	ro, ente	r "0" in column 2		L	TOTAL	467	OR	TOTAL		
	Ci	_AIMS AS A	MENDED	- PAR	T#		-	SMALL ENTITY			OTHER THAN		
	<u> </u>	(Column 1)		(Colu	mn 2) HEST	(Column 3)		SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	33	Minus	** 2	R	= -		X\$ 9=		OA	X\$18=		
	Independent	· /	Minus	***	T CLAIM	= -		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
								, TOTAL ADDIT, FEE		OR	TOTAL		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIG NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	99.	RATE	ADDI- TIONAL FEE	
	Total	. 23	Minus	** 6	28	= ' -		X\$ 9=	1	OR	X\$18=	,	
	Independent	. 1	Minus	***	7	=		X40=	ASS MAN	1 OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							j.	Care Care Care Care Care Care Care Care]			
			•	•				+135=	** * ******	OR			
						•	:	ADDIT. FEE	- reactification	OR	TOTAL ADDIT. FEE	· 高麗 · ·	
		(Column 1)			umn 2)	(Column 3)	-		• 4	, di tyrë L	Programmy		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE\	SHEST MBER /IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N S	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
AMENDMENT	Independent	<u> -</u>	Minus	***	NT OLAIN	=	┨╏	X40=		OR	, X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	-+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR	TOTAL		
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number f und in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS						RATE	FEE		RATE	FEE
FOR			NUMBER F	ILED	NUMBI	R EXTRA	BASIC FEE	375.00	OR	BASIC FEE	750.00
то	TAL CHARGEA	BLE CLAIMS	minus 20= *				X\$ 9=		OR	X\$18=	
	EPENDENT CL		minus 3 = *				X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	PRESENT			+140=		OR	+280=	·	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL E	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	, at a	HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 21	Minus	** 6) % -		X\$ 9=		OR	X\$18=	
	Independent	* 3	Minus	***	4	=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	CLAIM		+140=		OR	+280=	
							TOTAL ADDIT. FEE		ŌR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	mn '2)	(Column 3)	ADDIT: 1 EE E		4		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		+140=		OR	+280=	
			•				TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	4
		(Column 1)		(Colu	mn 2)	(Column 3)					
AMENDMENT C		CLAMS PEMAINING AFTLE AMENDMENT		PREV	KEST 1885 OUSLY 1FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	ÿ	Minus	+÷		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T () ()	=	X42=		OR	X84=	
	FIRST PRESE	ENTATION OF M	IOLITPLE DEI	PENDEN	I CLAIN	<u> </u>	+140=		OR	+280=	
	If the entry in colu * If the "Highest Nu	mn 1 is less than	the entry in colu	ımn 2, writ	e "0" in co	olumn 3. an 20. enter *20.	TOTAL		OR	TOTAL ADDIT. FEE	
1:	- it the mignest Nu	imber Previously I imber Previously I	and FOR IN IT	IJ JEKUE	m 1000 (I)	211 20, CHEC 20.	ADDIT. FEE			ADDIT, FEU	